## BEST AVAILABLE COPY

DATENT ADDI IOATION TOT OFFICE								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								RD 09/755520						
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN			
<u>ار</u> ج	OTAL CLAIMS	<del> </del>	,	olumn 1) (Column 2)				TYPE			OR SMALL ENTITY			
			36					RATE		FEE		RATE	FEE	
FOR			· NUMBER FILED		NUMBER EXTRA			BASIC F	EE ;	355.00	OR	BASIC FEE	710.0	
TOTAL CHARGEABLE CLAIMS			36 minus 20=		. 16			X\$ 9=	-		OR	X\$18=	288	
╟┷	DEPENDENT C		1	ninus 3 =		7		X40=			1_	X80=	560	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT					-	十		OR			
* If the difference in column 1 is less than zero, enter "0" in column 2							'	+135=	4		OR	+270=	A	
CLAIMS AS AMENDED - PART II								TOTAL	L		OR	TOTAL	1228	
(Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY						
<b>₹</b>		REMAINING	10 <b>61</b> (10), 45	HIGH NUM	EST BER	PRESENT	1			ADDI-	1		ADDI-	
MEN		AFTER AMENDMENT	18	PREVIO		EXTRA		RATE		ional Fee		RATE	TIONA FEE	
AMENDMENT	Total Independent	. 56	Minus	-3	To.	=		X\$ 9=		1	OR	X\$18=	/	
AM		ENTATION OF M	Minus	DENIDENT	2	-		X40=		7	OR	X80=		
_			OCTIO CE DE	r civocius	COMIN		<b>'</b>	+135=		1	OR	+270=		
	•							TOTA				YOTAL	-	
		(Column 1)		(Colun	nn 2)	(Column 3)		ADDIT. FE	<b>-</b>		J,	ADDIT. FEE		
0	4	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER WSLY	PRESENT EXTRA			TA	ADDI-	1 [	-	ADDI-	
								RATE		ONAL FEE		RATE	TIONAL	
AMENDMENT	Total	. 36	Minus		Le.	B		X\$ 9=	T	/	OR	X\$18=	/	
AM	Independent	NTATION OF MI	Minus	•••	<u>/D</u>	=		X40=	17		OR	X80= A	/	
ш		STATION OF MC	LITTLE DEF	ENUENT	CLAIM		<b> </b>	+135=	#			+270=		
							L	TOTAL	-		OR	TOTAL		
		(Column 1)		(O-1-	-		A	DDIT. FEE			OR ,	DOIT. FEE		
	RCC 4	CLAIMS		(Colum		(Column 3)	<b>y-</b>							
Ę	1-26.04	REMAINING AFTER		NUMB PREVIO		PRESENT EXTRA	ı	RATE		DDI- DNAL		RATE	ADDI- TIONAL	
NE I	Total	AMENDMENT		PAID F	OR -		L			EE		naie	FEE/	
AMENDMENT C	Independent	• •	Minus	<u>"                                    </u>		. 0		X\$ 9=		Į,	OR	X\$18=	7	
4		T PRESENTATION OF MULTIPLE DEPENDENT CLAIM  X40=								/	OR	X80=	7	
								+135=			OR	+270=	/	
u	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE  OR  ADDIT. FEE													
Ť	he Tüghest Num	ber Previously Paid	For (Total or	o SPACE is Independer	1955 (Trail 1963 et (17	n 3. enter "3." highest number				iale box	in colu	mn 1,		